

Changing the Face of Medicine: Celebrating America's Women Physicians

Exhibition Text

[Section One]

Changing the face of Medicine

Celebrating America's Women Physicians

Women have always been healers. As mothers and grandmothers, women have always nursed the sick in their homes. As midwives, wise women, and *curanderas*, women have always cared for people in their communities. Yet, when medicine became established as a formal profession in Europe and America, women were shut out.

Women waged a long battle to gain access to medical education and hospital training. Since then, they have overcome prejudices and discrimination to create and broaden opportunities within the profession. Gradually, women from diverse backgrounds have carved out successful careers in every aspect of medicine.

Changing the Face of Medicine introduces some of the many extraordinary and fascinating women who have studied and practiced medicine in America. If you have a favorite woman doctor, please add her to the roster by clicking on "Share Your Story" at the online exhibition www.nlm.nih.gov/changingthefaceofmedicine. We invite you to celebrate all of America's women physicians.

Photo Captions:

Dr. Lori Arviso Alvord, the first Navajo woman physician to be board-certified in surgery.
courtesy: Lori Arviso Alvord, M.D.

Dr. Sarah Adamson Dolley (seated, center) co-founded the Practitioners' Society of Rochester, New York, one of the first general women's medical societies in the United States, in 1886.
Courtesy: Edward G. Miner Library, Rochester New York

Dr. Marilyn Roubidoux, a cancer specialist who focuses on American Indian and Alaskan Native populations.
courtesy: Marilyn A. Roubidoux, M.D.

Making a Difference

In 1994, Lori Arviso Alvord (background photo) became the first Navajo woman to be board certified in surgery. After completing her training at Stanford University, she returned for six years to the New Mexico reservation where she had grown up. Surgery can remedy many ills, but as Alvord worked with her Navajo patients she learned that modern scientific medicine by itself could not reestablish the missing harmony in their health. Nowadays, Alvord incorporates elements of traditional healing practices in all aspects of medical care, aiming to better prepare patients for surgery, childbirth, or chemotherapy, for example. The psychological and spiritual

comfort can make a big difference for those people facing serious illness and surgery as well as speed their recovery afterwards.

courtesy: Lori Arviso Alvord, M.D., 1990s.

I went back to the healers of my tribe to learn what a surgical residency could not teach me. From them I have heard a resounding message: everything in life is connected. -- Lori Arviso Alvord, 2002

In 1991, cardiologist Bernadine Healy (b. 1944) became the first woman to be appointed director of the National Institutes of Health. Over the course of her career, she has held a series of high-profile leadership positions in medicine, serving as deputy director of the White House Office of Science and Policy, president of the American Heart Association, and president of the American Red Cross.

courtesy: American Red Cross, 2000

It is clear that all of us in the scientific community have a lot of breaking to do -- especially old rules, self-defeating habits, and glass ceilings. -- Bernadine Healy, Science, 1992

In 1967, Jane Wright (b. 1919), a cancer researcher and chemotherapy specialist, was named professor of surgery, head of the Cancer Chemotherapy Department, and associate dean, at New York Medical College, her alma mater. At the time, when African American women physicians numbered only a few hundred in the entire United States, Dr. Wright was the highest ranked African American woman at a nationally recognized medical institution.

courtesy: Photographs and Prints Division, Schomburg Center for Research in Black Culture, The New York Public Library, Astor, Lenox and Tilden Foundations, 1944.

Ruth Harriet Bleier (1923-1988), feminist, activist, and neurophysiologist, was among the first American scholars to examine gender bias in scientific research. A leading figure in the women's movement, she was also a vocal supporter of civil rights and reproductive freedom, and faced discrimination during her career because of her work on behalf of others.

courtesy: Medical History Department, University of Wisconsin, 1980s.

It does not seem unreasonable to expect that the development of feminist scientific theory and philosophy will proceed hand-in-hand with the feminist struggle to change the conditions of our lives and work... -- Ruth Bleier, Science and Gender: A Critique of Biology and Its Theories on Women, 1984

Dermatologist Nancy E. Jasso (b. 1960) is one of the founding physicians of a laser tattoo-removal project in the San Fernando Valley in California. Many of her patients have been turned down for jobs because of their tattoos, or they live in fear of retaliation because the designs link them to past membership in gangs. Because laser removal is expensive and takes many sessions, those who cannot afford the procedure can work for the community in exchange for their treatment.

courtesy: Nancy E. Jasso, M.D., M.P.H., 2001.

Providing care is more than just curing a disease. -- Nancy E. Jasso, 2002

[Section two]

Fighting for Rights

As part of the wider movement for women's rights during the mid-1800s, women campaigned for admission to medical schools and for the opportunity to learn and to work alongside men in the medical profession. Such rights came slowly. Despite all the gains that were made, women's struggle to receive equal pay and access to the same career opportunities as their men colleagues continues today.

In the nineteenth century, ideas about women's traditional roles as wives and mothers were used to exclude them from the professions. Since then, women have faced criticism for pursuing careers, balancing family life with work responsibilities, and speaking out about discrimination and unfairness in the job market and in society at large.

Over the last 150 years, women physicians have confronted barriers in every area of medicine. By succeeding in work once considered "unsuitable" for women, these leaders have overturned assumptions about the differences between men and women and opened doors for others.

Elizabeth Blackwell (middle row, far left) grew up among reformers, including abolitionists and campaigners for women's rights. This family photograph was taken in 1906.
courtesy: The Schlesinger Library, Radcliffe Institute, Harvard University

In 1849, Elizabeth Blackwell (1821-1910) became the first woman in America to earn the M.D. degree. She was an advocate for women in medicine and argued that they were especially suited to the caring professions. The idea that women were more sensitive, sympathetic, and nurturing than men had previously been used to limit women's education and to exclude them from careers in the professions. Instead, Blackwell made a case for women physicians based on precisely these qualities.

Elizabeth Blackwell's letter of admission to Geneva Medical College, 1847.
courtesy: Blackwell Family Papers, Manuscript Division, Library of Congress

Elizabeth Blackwell later said that a dying friend's plea -- to give women patients the option of being cared for by a woman physician -- motivated her to apply to study medicine. She was turned down by every medical school in New York City and Philadelphia. At Geneva Medical College in upstate New York, the faculty tried to avoid the issue entirely by asking the all-male student body to vote on Blackwell's admission to the school. They had assumed that the students would never allow a woman to enroll, but as a practical joke, the students voted to admit her.

Anatomical lectures at the Woman's Medical College of the New York Infirmary, *Frank Leslie's Illustrated Newspaper*, April 16, 1870.
courtesy: National Library of Medicine, Images from the History of Medicine

Elizabeth Blackwell's graduation from medical school and her efforts to increase the number of women in medicine received great attention in the press, inspiring debate around the country on the issue of women physicians and encouraging women to apply to medical school. After graduation, however, many women physicians were often denied hospital internships, or jobs teaching or practicing medicine. In 1857, Elizabeth and her sister Emily Blackwell founded the New York Infirmary for Women and Children. Twelve years later, they added a medical school for women. The Woman's Medical College of the New York Infirmary offered students the chance to care for patients, and provided employment for women physicians as teachers and doctors.

Mary Putnam (later Mary Putnam Jacobi), early 1860s.

courtesy: The Schlesinger Library, Radcliffe Institute, Harvard University, photograph by Bogardus

Mary Putnam Jacobi (1842-1906) was the first woman elected to the New York Academy of Medicine. Her colleagues regarded her as a scientist of the highest caliber, and over the course of her career, she wrote more than 120 scientific articles and nine books. She was also a wife and mother, combining family life with an eminent career. In her work, and by her own example, Mary Putnam Jacobi discredited the ideas that women were not suited to intellectual pursuits, and that education damaged women's bodies and their ability to raise children.

Letter from Mary Putnam Jacobi to Elizabeth Blackwell, December 25, 1888.

courtesy: Blackwell Family Papers, Manuscript Division, Library of Congress

In this letter (above) to her former mentor, Mary Putnam Jacobi acknowledged the importance of Elizabeth Blackwell's early work, but criticized her limited view of women's role in medicine. Jacobi had served on the faculty of the Woman's Medical College of the New York Infirmary, but she and Blackwell disagreed profoundly on the future of the profession and the best way to advance the cause of women physicians. Jacobi asserted that women should have equal access with men to the best education because they were equally capable, and not because of any special qualities they might have as women.

Sphygmograph tracings showing the measurement of a woman's pulse. From Mary Putnam Jacobi's prize-winning manuscript, "The Question of Rest for Women during Menstruation," 1876.

courtesy: National Library of Medicine

In 1875, Edward H. Clarke, a former professor at Harvard Medical School, published *Sex in Education: or, A Fair Chance for the Girls*. In it, he argued that women risked illness and even sterility if they were educated alongside men and held to the same intellectual standards. Mary Putnam Jacobi won Harvard University's prestigious Boylston Prize for her essay refuting this idea, basing her arguments for equality on scientific proof. She used an instrument known as a sphygmograph to study and record measurements of the pulse, demonstrating the stability of a woman's health regardless of her physical and mental exertion.

Mahomed sphygmograph, ca. 1880.

courtesy: M. Donald Blaufox, M.D., Ph.D.

Confronting Prejudice

The first women of color to build careers in medicine confronted financial hardship and racism as well as discrimination against women. For generations, their families had been enslaved or oppressed. To even begin training, these women often had to work to pay their way through medical school or seek funding from supporters of women's and minorities' rights.

Once they became doctors, women of color often made important contributions by bringing better standards of care to their own communities and serving as role models for all women.

In the twentieth century, the discrimination experienced by women and minorities fueled broad social movements for change. Women physicians involved in this struggle often became advocates for those who were suffering from neglect or abuse.

Susan La Flesche (later Susan La Flesche Picotte) graduated from the Woman's Medical College of Pennsylvania in 1889. She is shown here (third row, standing, fourth from right) with her graduating class.

courtesy: Archives and Special Collections on Women in Medicine, Drexel University College of Medicine

Susan La Flesche Picotte (1865-1915) was the first American Indian woman to graduate from medical school, receiving federal funding to pay for her education. She returned to her birthplace, the Omaha Reservation in Nebraska, to practice medicine, and helped bring better standards of health care to her own community.

Susan La Flesche Picotte, early 1900s.

courtesy: Nebraska State Historical Society Photograph Collections

As a child, Susan La Flesche Picotte had watched an Indian woman die when a white doctor refused to treat her. This experience shaped her desire to study medicine and to bring the best medical care to the Omaha reservation. Like her father, who was chief of the Omahas, Picotte firmly believed in collaborating across cultures for the benefit of her community. She brought many innovations to the reservation to improve health and the quality of life, including a much needed hospital in 1913.

Susan La Flesche Picotte's diary, September 28, 1910.

courtesy: Nebraska State Historical Society, Library/Archives

During her career, Susan La Flesche Picotte looked after more than 1,300 Omaha people, scattered over 450 square miles. She had many roles in the community, serving as physician, educator, personal and legal advisor, and chair of the civic committee. In her diary, Picotte recorded her work resolving legal disputes, counseling patients, and treating various illnesses and injuries, as well as the details of everyday life on the reservation, including births, marriages, and deaths.

Matilda Evans (front row, center) with a community group in front of St. Luke's Hospital, Columbia, South Carolina, ca. 1930.

courtesy: South Caroliniana Library, University of South Carolina, Columbia

The influence of Matilda Evans extended far beyond the individual patients she treated. Her survey of the health of black schoolchildren in Columbia became the basis for a permanent medical examination program in South Carolina public schools, and she founded several health care organizations. She also mentored aspiring women students, offered a recreational program for underprivileged boys, ran her own farm, and published a weekly newspaper -- *The Negro Health Journal of South Carolina*.

Matilda Evans in the operating room of Taylor Lane Hospital, the hospital she founded in Columbia, South Carolina, in 1901.

courtesy: South Caroliniana Library, University of South Carolina, Columbia

Matilda Evans treated patients in her own home until she established the Taylor Lane Hospital, Columbia's first black hospital, in 1901. By 1906, railway and utility companies were paying the institution to provide care for their employees, giving one dollar a day for each patient.

Matilda Evans served as vice president of the National Medical Association, an organization founded in 1895 in response to the exclusion of blacks from the American Medical Association.

courtesy: From A True Likeness, copyright Estate of Richard Samuel Roberts, used by permission of Bruccoli Clark Layman, Inc.

After Matilda Evans (1872-1935) received her M.D. degree from the Woman's Medical College of Pennsylvania in 1897, she returned to Columbia, South Carolina, to build a practice. When the state board of medical examiners awarded her a license to practice "physic and surgery" the following year, she became the first African American woman licensed as a physician in the state.

Making a Difference

(Background photo) Emily Barringer (1876-1961) was the first woman ambulance physician at New York City's Gouverneur Hospital. Although she was at first denied an appointment at the hospital, she was later allowed to take up the position and became the hospital's first woman medical resident and ambulance physician in 1902. During World War II, Barringer lobbied Congress to allow women physicians to serve as commissioned officers in the Medical Reserves. The Sparkman Act granted that right in 1943.

Courtesy: New York Times Archive, ca. 1902

Dorothy Ferebee (1890-1980) devoted her career to the care of some of the poorest members of society. As medical director of the Mississippi Health Project, Ferebee traveled south every summer during the Great Depression to provide medical care to the state's rural black communities. In 1925, in her home town of Washington, D.C., she established the Southeast Neighborhood House in a neglected area of Capitol Hill to offer affordable health care to the local African American community. Ferebee is shown here (center) presenting information on the Howard University Medical School health services program, which she directed from 1949-1968.

courtesy: Moorland-Spingarn Research Center, Howard University, 1950s

We women were always the last to get assignments in amphitheaters and clinics. And I? I was the last of the last because not only was I a woman, but a Negro, too. -- Dorothy Ferebee, The Washington Post, 1978

Sharon Malotte (b. 1955) is a member of the TeMoak Band of Western Shoshones of the South Fork Indian Reservation, and the first American Indian from Nevada to become a physician. She is shown here in traditional dress, with her daughter Bhie-Cie Naïve Malotte-Ledesma.

courtesy: Sharon M. Malotte, M.D., photograph by d'Joyce Bismarck, 1986

When you see me, you see an American Indian, a Shoshone Indian from the local area, and that makes a difference with my minority patients. I have an off-the-reservation accent to my voice, and other Indian people know I'm Indian when I speak on the phone. I may be educated, but I still have that inflection to my voice. How does that make a difference? I am seen as a role model, one who overcame significant difficulties becoming a doctor. I talk with students, and tell them anything is possible. -- Sharon Malotte, 2002

(Below) Margaret Craighill (1898-1977) was the first woman to be commissioned into the Army Medical Reserve Corps after the passage of Sparkman Act in 1943. The act granted women the right to receive commissions in the Army, the Navy, and the Public Health Service.

courtesy: National Library of Medicine, Images from the History of Medicine, 1946

[Section three]

Achieving Breakthroughs

By the early 1900s, women had made impressive inroads into the medical profession as physicians, but few had been encouraged to pursue careers as medical researchers. Women physicians were unwelcome in the most prestigious medical specialties, such as surgery, and excluded from influential leadership positions in scientific institutions.

Trying to build careers in a sometimes hostile climate, women physicians created their own opportunities -- by founding new specialties, building expertise in neglected areas, and fighting for access to mentors, laboratory facilities, and research grants.

The achievements of these trailblazers often went unrewarded or unacknowledged for years. Yet these resourceful innovators carved paths for other women to follow, and eventually they gained recognition for their contributions to medical science. Their breakthrough discoveries have benefited us all -- patients and practitioners.

Florence Sabin left Johns Hopkins to join the Rockefeller Institute for Medical Research in 1925, the first woman to be granted full membership. She is shown in her lab at the Institute in the 1930s.

courtesy: Colorado Historical Society

In 1901, as a student at The Johns Hopkins University School of Medicine, Florence Sabin received a fellowship to work with Professor Franklin P. Mall in the department of anatomy. Her first book, *An Atlas of the Medulla and Midbrain*, was published the same year and quickly became a standard text in the field of anatomy. Her later work overturned the traditional explanation of the development of the lymphatic system. In 1917, after the death of Professor Mall, Sabin seemed a natural choice to succeed him, yet she was passed over for promotion in favor of a male candidate -- one of her former students. Eight years later, she left Johns Hopkins for the Rockefeller Institute for Medical Research.

Florence Sabin teaching anatomy at The Johns Hopkins University School of Medicine, early 1900s.

courtesy: The Alan Mason Chesney Medical Archives of The Johns Hopkins Medical Institutions

Florence Sabin (1871-1953) was one of the earliest women physicians to build a career as a research scientist. In 1903, she became the first woman appointed to the faculty of The Johns Hopkins University School of Medicine, her alma mater. When the School of Medicine was founded in 1893, a group of women philanthropists donated the funds needed to open it on the condition that women be admitted on the same terms as men. Women students were not always made to feel welcome, however, and Sabin experienced some harassment from other students during her medical training.

Florence Sabin with her laboratory staff at the Rockefeller Institute for Medical Research, 1930.

courtesy: Rockefeller Archive Center

Eventually, Florence Sabin began to receive the accolades appropriate to her reputation as one of the most eminent scientists of her era. In 1924, she served as the first woman president of the American Association of Anatomists, and in 1926, she became the first woman elected to the National Academy of Sciences. Later in her career, Sabin was also appointed health advisor to Colorado's Post-War Planning Committee, where she helped design a series of new public health laws.

Helen Taussig examines a child, ca. 1947. Taussig's large boxed hearing aid is next to the child.
courtesy: The Alan Mason Chesney Medical Archives of The Johns Hopkins Medical Institutions

Often called the founder of pediatric cardiology, Helen Brooke Taussig (1898-1986) is renowned for her work on the once untreatable and fatal "blue baby" syndrome. In spite of suffering from dyslexia, a reading impairment, Taussig excelled as a student and planned to begin her career in medicine by studying public health at Harvard University. The university did not grant women students degrees, however, so instead she enrolled at The Johns Hopkins University School of Medicine. Taussig lost her hearing after contracting whooping cough as an intern, and relied on lip reading and hearing aids until an operation restored it in 1963.

Illustration for Helen Taussig's book, *Congenital Malformations of the Heart*, showing a defect in the wall between the heart's upper chambers.
courtesy: The Alan Mason Chesney Medical Archives of The Johns Hopkins Medical Institutions

In 1930, Helen Taussig was appointed head of the Children's Heart Clinic at Johns Hopkins Hospital, where she studied heart defects in babies and young children. In 1944, she proposed a new surgical procedure to compensate for the heart defect that causes "blue baby" syndrome. The operation, developed with surgeon Alfred Blalock and surgical technician Vivien Thomas, was an immediate success. It has since prolonged countless lives and is considered a key step in the development of adult open-heart surgery.

(Below) Helen Taussig with children at a South African clinic, 1970.
courtesy: The Alan Mason Chesney Medical Archives of The Johns Hopkins Medical Institutions

With the success of the "blue-baby" operation, families flocked to clinics where it was performed. Helen Taussig put her international medical celebrity to use to encourage the establishment of other centers to train pediatric cardiologists. She also supported efforts to educate the public about issues affecting public safety and scientific progress, such as responsible animal-based biomedical research. In the early 1960s, she successfully campaigned against the release of the sedative thalidomide in the United States, after the drug was shown to have caused birth defects when taken by pregnant women in Europe.

Helen Taussig's Presidential Medal of Freedom, awarded 1964.
courtesy: The Alan Mason Chesney Medical Archives of The Johns Hopkins Medical Institutions

Helen Taussig enjoyed the affectionate gratitude of her patients and their families and earned the admiration of her colleagues for her contributions to medicine. In 1965, she became the first woman to serve as president of the American Heart Association. Taussig received the prestigious Lasker Award, sometimes known as the "American Nobel Prize," in 1954, and was awarded the Medal of Freedom by President Lyndon Baines Johnson in 1964.

May Edward Chinn (above, second from right) participating in a march for suffrage.
courtesy: George B. Davis, Ph.D.

May Edward Chinn (1896-1980) practiced medicine in Harlem for more than 50 years. Her father was a former slave from the Cheyney (Chinn) plantation in Virginia, and her mother, Lulu Anne, was an American Indian from the Chickahominy Reservation near Norfolk, Virginia. The same year that the University and Bellevue Hospital Medical College announced that it would admit women for the first time, May Edward Chinn marched for women's rights. She enrolled at the school three years later and graduated in 1926 -- the first African American woman to complete her medical education there.

May Edward Chinn treats a young patient in her private practice, 1930.
courtesy: George B. Davis, Ph.D.

May Edward Chinn treated patients of all ages in her general medical practice in Harlem, New York, but she also maintained a strong interest in research. Between 1928 and 1933, she studied cellular methods for cancer detection with George Papanicolaou, who developed the "Pap" smear test to detect early cervical cancer. In 1945, she was invited to join the staff of the Strang Cancer Clinic of Memorial Hospital in New York City. After years of enduring little welcome within the medical profession, Chinn began to receive the recognition and respect she deserved, and in 1954, she was elected to the New York Academy of Sciences.

May Edward Chinn (front row, third from left) with Harlem Hospital staff, 1926.
courtesy: George B. Davis, Ph.D.

May Edward Chinn was the first African American woman to hold an internship at Harlem Hospital in New York City and the first woman to serve on the hospital's emergency ambulance crew. In spite of this, she was barred from a residency at the hospital because she was a woman. Black physicians could not admit patients to the city's white hospitals during the 1930s and 1940s. In 1928, Chinn opened her own medical practice in Harlem. She saw most of her patients in her office or at their homes -- even for surgery, in some cases. To learn the latest techniques in cancer diagnosis, and how to take biopsies, Chinn accompanied her patients to their clinic appointments.

Virginia Apgar played in an orchestra as a young student, and performing and making instruments remained lifelong interests. She is shown above shortly after completing her graduate training at The Johns Hopkins University, in the workshop where she made musical instruments, 1960.
courtesy: Archives & Special Collections, Columbia University Health Sciences Division, photograph by Elizabeth Wilcox

In 1959, while she was on sabbatical leave, Virginia Apgar earned a master's degree in public health from The Johns Hopkins University. She then devoted herself to the prevention of birth defects, through public education and fundraising for medical research. Apgar later became the director of the division of congenital defects at the National Foundation for Infantile Paralysis (now the March of Dimes) and received many honors and awards for her work.

Virginia Apgar with a newborn baby, 1958.
courtesy: Archives & Special Collections, Columbia University Health Sciences Division, photograph by Elizabeth Wilcox

Virginia Apgar (1909-1974) originally trained as a surgeon, but because other women had been unable to build successful careers in surgery, the chief of the department at Columbia University College of Physicians and Surgeons encouraged her to study anesthesiology instead. Apgar studied obstetrical anesthesia -- the effect of maternal anesthesia given during childbirth on the newborn baby. In 1952, she developed the Apgar score, the first standardized way to quickly evaluate the general health of a newborn baby.

Virginia Apgar demonstrating the Apgar score chart, 1970.
courtesy: The Mount Holyoke College Archives and Special Collections, photograph by Harry Benson

The Apgar score is the total of 0 to 2 points assigned to each of five assessments of a newborn's vital signs: Appearance (color), Pulse (heart rate), Grimace (reflex response), Activity (muscle tone), and Respiration (respiratory effort). The research of Virginia Apgar and her colleagues later demonstrated that the Apgar score predicts not only neonatal survival, but also a baby's neurological development. Calculating an infant's Apgar score is now standard practice in delivery rooms worldwide.

Making a Difference

Gerty Cori (1896-1957) was the first woman in America to receive a Nobel Prize in Physiology and Medicine. In 1947, she and her husband were named joint recipients for their work on carbohydrates in the human body.

courtesy: Becker Medical Library, Washington University School of Medicine, 1947

The love for and dedication to one's work seems to me the basis for happiness ... For a research worker, the unforgotten moments ... are those rare ones, which come after years of plodding work, when the veil over nature's secret seems suddenly to life ...

Gerty Cori, on This I Believe, a series of radio broadcasts with Edward R. Murrow, 1952

Through her detailed research and fearless field investigations, Alice Hamilton (1869-1970) drew attention to the hazards of industrial work. A pioneer in toxicology, she studied occupational illnesses and the dangerous effects of industrial metals and chemical compounds on the human body. Hamilton's benchmark studies helped raise awareness of on-the-job dangers and laid the foundation for the development of occupational safety standards for workers in the United States.

courtesy: National Library of Medicine, Images from the History of Medicine

In the early 1970s, Dr. Janet Rowley identified a process of "translocation," or the exchange of genetic material between chromosomes in patients with leukemia. This discovery, along with her subsequent work on chromosomal abnormalities, has revolutionized the medical understanding of the role of genetic exchange and damage in causing disease.

courtesy: Janet Davison Rowley, M.D.

[Section four]

Leading Change

Bringing fresh perspectives to the profession of medicine, women physicians often focused on issues that had until then received little attention, such as the social and economic costs of illness, and new research and treatments for women and children. As the first to address some of these needs, women physicians often led the way in shaping new health programs and reforms designed to protect the most vulnerable members of society.

Encompassing all aspects of patients' lives, this approach to health care is reshaping the way medical practitioners and patients deal with disease and injury. Together, we are widening the scope of medical care for individuals and communities and improving the quality of life.

Applying a broad definition of their professional responsibilities, women physicians from diverse backgrounds have reached out across communities, establishing innovative programs to improve quality of life and to provide better access to medical care.

I am interested in public health in the broad meaning of the health of the people ... If you define health not merely as the absence of disease but as physical, mental and social well-being, there isn't anything you don't get into. -- Leona Baumgartner, Modern Medicine, 1965

Martha May Eliot.

courtesy: National Library of Medicine, Images from the History of Medicine photograph by Bachrach

Martha May Eliot (1891-1978) devoted her life to the care of children. For more than a quarter of a century, she worked for the Children's Bureau, a federal agency established in 1912 to improve the health and welfare of children in America. Eliot began her career there in 1924 as director of the Division of Child and Maternal Health, and went on to become the bureau's assistant chief in 1935 and chief in 1951.

(Below) Martha May Eliot and Ethel Collins Dunham, 1915.

courtesy: The Schlesinger Library, Radcliffe Institute, Harvard University

Martha May Eliot (left) majored in classical literature at Radcliffe College, where she also completed her premedical training. On principle, she first applied to Harvard University Medical School, which did not admit women at the time. In 1914, she entered The Johns Hopkins University School of Medicine, where her life partner, Ethel Collins Dunham, was also enrolled. Dunham, a pediatrician who specialized in the care of newborns and premature infants, became director of the Division of Child Development at the Children's Bureau in 1935. She and Eliot received numerous awards for their work on children's health. They were the first women to receive the American Pediatric Society's prestigious Howland Medal, awarded to Dunham in 1957 and to Eliot 10 years later.

(Below) Martha May Eliot with delegates to the first World Health Assembly, in front of the United Nations, Geneva, Switzerland, 1948.

courtesy: The Schlesinger Library, Radcliffe Institute, Harvard University

After World War II, Martha May Eliot (center, front) was a delegate to the first World Health Assembly, which led to the creation of the World Health Organization (WHO) and the United Nations International Children's Emergency Fund (UNICEF). She was the only woman to sign the founding document of the WHO, and from 1949 to 1951 she served as the organization's assistant director general. She chaired the department of child and maternal health at the Harvard School of Public Health between 1957 and 1960 and continued her work for the World Health Organization and UNICEF after her retirement from Harvard in 1960.

When she is not working in the city, Barbara Barlow likes to relax at her country home in Lancaster, Pennsylvania. She is an experienced beekeeper and enjoys tending to her beehives.

courtesy: Barbara Barlow, M.A., M.D., 2001

Barbara Barlow changed her plans to become a medical missionary abroad when she did a surgical residency in a poor New York neighborhood and saw a critical need for pediatric medical services in the city. One of the first things Barlow noticed when she later moved to Harlem was the high rate of hospital admissions of children suffering from preventable playground injuries. With a colleague, she compiled data showing that the injury rate for children in Harlem was twice the national average. Barlow sought funds to repair the area's playgrounds and enlisted volunteers to help with the work.

(Above) The P.S. 196 district playground was refurbished by Barbara Barlow and a group of volunteers, Harlem, New York, 2000.

courtesy: Barbara Barlow, M.A., M.D.

In 1988, with funding from New York City's Parks Department, Barbara Barlow enlisted an architect to design safe but low-cost playground structures, and invited artists and volunteers to paint murals near playgrounds. Since 1991, more than 40 playgrounds have been rebuilt in Harlem, and a coalition of funding sources and Harlem community organizations now offers after-school activities ranging from sports to creative art classes. Through the "Injury Free Coalition for Kids," an organization developed by Barlow with support from the Robert Wood Johnson Foundation, similar programs now exist around the country -- each of them reflecting the needs and conditions of the community it serves.

Barbara Barlow and her colleagues at Harlem Hospital, ca. 2000.

courtesy: Barbara Barlow, M.A., M.D., photograph by Hakim Mutlag

Barbara Barlow (b. 1938) was the first woman to train in pediatric surgery at Babies Hospital, Columbia University Medical Center (now called Babies' and Children's Hospital of New York). By researching and documenting the causes of injuries to children in Harlem, and increasing public education about prevention, she has helped to reduce dramatically accidents and injuries to inner-city children in New York City and throughout the United States.

Inspiring Others

In the 1960s, the social changes brought about by the civil rights and women's movements and the passage of equal opportunity legislation led to a dramatic increase in the numbers of women and minorities entering medicine. This demographic shift has helped ensure that a more diverse cross-section of society is now represented in the medical profession.

Recognizing the value of different cultural and sociological perspectives in medicine, many of the women who now train future physicians are developing innovative teaching strategies and programs to encourage students from many backgrounds to enter all medical specialties.

Patients can find doctors from their own communities and cultures whom they may feel are better able to understand their concerns.

Edith Irby (later Edith Irby Jones) is shown here in 1947, the year before she became the first black student to attend the University of Arkansas School of Medicine. Later in her career, Jones was honored by "Edith Irby Jones Day" in Houston, Texas, and an ambulatory center at the former Southeast Memorial Hospital in Houston was named after her.

courtesy: Edith Irby Jones, M.D.

In 1948, nine years before the "Little Rock Nine" integrated Central High School in Little Rock, Arkansas, Edith Irby Jones (b. 1937) became the first black student in the South to attend classes with white students, and the first black student to attend the University of Arkansas School of Medicine. Her medical education reflected a community-wide effort. African Americans in Little Rock and across Arkansas contributed to her medical school education with dimes and quarters. High school alumni helped pay for her tuition, and a similar effort sponsored by the black newspaper, the Arkansas State-Press, paid for her other expenses. Her enrollment in a previously segregated southern medical school made news headlines across the nation.

Edith Irby (later Edith Irby Jones) in the hallway of the University of Arkansas School of Medicine, 1949.

courtesy: Photograph by Phil Stern

Although Edith Irby had been accepted to attend classes at the university, she was not allowed to use the same dining, lodging, and bathroom facilities as other students. Forced to dine in the segregated staff dining room, every day she found a vase of fresh flowers placed on her table by the custodial staff -- a sign of support from African American workers at the school. Later in her career, Edith Irby Jones made her own efforts to strengthen black community ties, spending many nights traveling the state to help enlist new members in the National Association for the Advancement of Colored People (NAACP).

Edith Irby Jones in her office in Houston, 1986.

courtesy: EBONY Magazine, Johnson Publishing Company, Inc.

Throughout her career, Edith Irby Jones has worked to improve life for the poorest members of society. Her efforts to eliminate segregation in medical education and to promote equal access to affordable health care have made her a role model for many African American physicians. In 1985, she was elected president of the National Medical Association, a professional association founded in 1895 in response to the exclusion of blacks from the American Medical Association. She has also been active in the American Medical Women's Association and Planned Parenthood, as well as other groups. In 1991, she helped establish a medical clinic in Haiti.

Katherine Flores with students from a research seminar in the Junior Doctor's Academy program, Fresno, California, 2002.

courtesy: Katherine A. Flores, M.D.

The Sunnyside High School Doctor's Academy and the middle school Junior Doctor's Academy, established by Katherine Flores in Fresno in 1999, provide much-needed support for Latino students who are interested in careers in medicine. Because she remembers the difficulties she faced in becoming a physician, Flores hopes that programs like these will attract students who otherwise might not consider medical careers. Students in the programs are encouraged to research health issues and present their findings, and in the process to imagine themselves as medical students.

United Farm Workers flag and beret.

courtesy: Katherine A. Flores, M.D.

Katherine Flores vividly remembers the exhausting work of gathering buckets of plums, as a young child growing up in a migrant farm worker community. Because she witnessed the effects of inadequate medical care for farm workers, which worsened her grandfather's health, she decided early in life to try to make a difference. Later she recalled, "Growing up in the fields with my family was what I knew and accepted. As I got older and understood the world better, the injustices farm workers suffered became clearer to me. As a college student I became involved with 'La Causa' and marched with [labor activist and founder of the United Farm Workers organization] Cesar Chavez ... I began to fully appreciate the mission in life we each must commit to for the betterment of our communities."

Katherine Flores's grandfather, Juan Hernandez, 1953.

courtesy: Katherine A. Flores, M.D.

Katherine Flores was born in Fresno, California, into a family of migrant farm workers. Her mother died when Flores was an infant, and her mother's parents, originally from Mexico, raised her. Her grandmother always reminded Flores of her priority -- *la familia*. Her grandparents, who worked in the fields near Fresno, imparted their strong work ethic to her in spite of the hardships of their own lives.

Katherine Flores and her grandmother, Antonia Hernandez, 1972.
courtesy: Katherine A. Flores, M.D., photograph by Olan Mills

Sustained by her family and her Mexican heritage, Katherine Flores (b. 1953) brings a vibrant sense of community to her medical practice, her teaching, and her work as an administrator. Currently a faculty member of the University of California San Francisco Fresno Medical Education Program, she also serves as the project director of the California Health Education Training Center and the Latino Center for Medical Education and Research in Fresno.

Making a Difference

(Background photo) In 1950, obstetrician and gynecologist Helen Dickens (1909-2001) became the first African American woman admitted to the American College of Surgeons. During her career, Dickens founded a teen clinic for school-age mothers in Philadelphia, and as associate dean for minority admissions at the University of Pennsylvania, she helped increase student diversity at the medical school.

courtesy: Archives and Special Collections on Women in Medicine, Drexel University College of Medicine, photograph by G. M. Wilson, 1940s

I think that, being an African American physician, you may see some African American social and cultural issues that a white physician may not, in all honesty, be aware of. They might deal differently if they were aware it was there. -- Helen Dickens, Penn Medicine, 1990

Reaching a broad audience and providing a forum for helpful discussion of any medical issue, psychiatrist Rebekah Wang-Cheng (b. 1953) wrote a bi-weekly question-and-answer column for the Milwaukee Journal Sentinel which is still syndicated over the Internet. She also served as co-host of the *Adventist Development and Relief Agency World*, a cable television program reporting on humanitarian work.

courtesy: Rebekah Wang-Cheng, M.D., 2000

"All the world's a classroom" (to paraphrase Shakespeare) and patients of all ages, given the time and opportunity, are some of the most eager learners. -- Rebekah Wang-Cheng, 2000

As a member of the women's health movement of the 1970s, Helen Rodriguez-Trias (1929-2001) campaigned for reproductive rights and prenatal care for the underserved, and fought against enforced sterilization. She expanded the range of public health services for women and children in minority and low-income populations in the United States, Central and South America, Africa, Asia, and the Middle East.

courtesy: JoEllen Brainin-Rodriguez, M.D., 1970s

An activist and passionate advocate for poor women of color, Helen educated a generation of women activists of all colors who sought to advance women's rights through health ... If anyone deserves the title of mother of the movement for reproductive rights, it's Helen Rodriguez-Trias. - Susan E. Davis, American Journal of Public Health, 2002

Through her pioneering work in sex education, Mary Steichen Calderone (1904-1998) brought an uncomfortable subject to the forefront of public debate. Beginning in the 1950s, when public discussion of such issues was controversial, Calderone flouted convention by speaking out in the first place on such a topic, and by speaking out as a woman. In 1964, she founded the Sex Information and Education Council of the United States (SIECUS) to promote sex education for children and young adults. Her lifelong efforts to equip young people with the confidence and knowledge to enjoy safe and healthy sex lives in adulthood were truly revolutionary. The debate she began in the 1950s has paved the way for vital discussions today about sexually transmitted diseases, AIDS, and unplanned pregnancies.

courtesy: The Schlesinger Library, Radcliffe Institute, Harvard University, photograph by Henry Grossman, 1970s

Our children are not going to be just "our children" -- they are going to be other people's husbands and wives and the parents of our grandchildren. -- Mary Steichen Calderone, NBC TV, 1974

[Section five]

Transforming the Profession

In recent decades, women physicians have risen to the very top ranks of institutions that are at the forefront of medical research and that define the highest standards of practice in medicine. They identify and respond to many of the most urgent crises in modern medicine, from the needs of underserved communities, to AIDS, to natural and man-made disasters.

As leaders, they direct research and funding and are instrumental in implementing the policies, developing the drugs and treatments, and drafting the legislation required to meet emerging medical challenges.

They are promoting reforms to eradicate the professional barriers that many of them faced in their own careers, and they are working to change the way that medicine is taught and practiced.

Catherine DeAngelis, ca. 1990.

courtesy: Catherine DeAngelis, M.D., M.P.H.

During her career, Catherine DeAngelis was vice dean of academic affairs and faculty at The Johns Hopkins University School of Medicine. In this position, she worked to remedy gender bias at the medical school. She also launched the Women's Leadership Council, which met monthly to address women's concerns about professional advancement, including salary inequities and the low numbers of women in senior faculty positions. In 2000, DeAngelis became the first woman to be appointed editor of the *Journal of the American Medical Association*. By focusing attention on topics that have often been overlooked, she has brought a new emphasis on women's health to the internationally influential journal.

Catherine DeAngelis with fellow students at Wilkes College, 1960s.

courtesy: Catherine DeAngelis, M.D., M.P.H.

To pay for premedical training at Wilkes College, Pennsylvania, Catherine DeAngelis worked as a nurse and lab researcher. She also set up an infirmary. A dedicated, successful student, DeAngelis was the first woman elected class president and was named homecoming queen. She received her M.D. degree in 1969 and a master's degree in public health in 1973. Over the next

20 years, she combined pediatrics care with teaching at Columbia University, the University of Wisconsin, and The Johns Hopkins University.

Catherine DeAngelis at the Scranton State Hospital School of Nursing, ca. 1960.
courtesy: Catherine DeAngelis, M.D., M.P.H., photograph by Prestwood Studio

Catherine DeAngelis (b. 1940) grew up in a coal-mining town in Pennsylvania. She developed an interest in medicine early in life, and began asking her parents for a toy doctor's kit from the age of four. As a young girl, DeAngelis considered working with the Maryknoll Sisters, a missionary order whose humanitarian work appealed to her, but she eventually decided to pursue her interest in medicine. She could not afford to go to medical school and instead enrolled at Scranton State Hospital School of Nursing. While she was in nursing school, DeAngelis "read everything in the library and loved it." After graduation, she took a job at Columbia Presbyterian Medical Center in New York as a nurse, hoping one day to be able to attend medical school.

Susan Briggs helps to evacuate children following an earthquake in Armenia, 1989.
courtesy: Susan M. Briggs, M.D., M.P.H.

Trauma surgeon Susan Briggs has spent her career responding to medical emergencies at home and around the world. "Every disaster leaves behind devastated and disrupted lives," she says. Her job is to provide the practical aid and the expert medical care required to help survivors begin rebuilding their lives. As a volunteer with Project Hope, a charitable organization that sends medical personnel to large-scale accidents and disasters, Briggs has visited scenes of trauma around the globe. During the earthquake rescue effort shown here, one hundred children were evacuated to the United States for medical treatment.

Susan Briggs (above, second from right) with an American burn team near Ufa, Russia, June 1989.
courtesy: Susan M. Briggs, M.D., M.P.H.

"Natural and man-made disasters such as hurricanes, earthquakes, industrial accidents, terrorists attacks, and transportation accidents all present major challenges to disaster medical personnel," says Susan Briggs. The burn team was called to the scene of an accident in which a gas pipeline exploded, derailing two passing trains. Almost 1,100 passengers were involved in the accident, and many of them were injured.

Susan Briggs at Ground Zero, World Trade Center site, New York City, September 2001.
courtesy: Susan M. Briggs, M.D., M.P.H.

Susan Briggs (b. 1943) is the supervising medical officer of the International Medical Surgical Response Team in Boston, an organization that she established in 2000 to respond to natural and man-made disasters. On September 11, 2001, Susan Briggs had just finished a routine medical procedure when she received a call from the Office of Emergency Preparedness in Washington, D.C., concerning the attacks on the World Trade Center in New York City. She quickly assembled a team of 70 Boston-area medical professionals. Within hours they were on their way to New York to provide relief and medical care.

Antonia Novello is sworn in as surgeon general of the United States in 1990. She is shown with her husband, Joseph Novello, also a physician, President George H. W. Bush, and Justice Sandra Day O'Connor.
courtesy: Antonia C. Novello, M.D., M.P.H., Dr. P.H.

When Antonia Novello (b. 1944) was appointed surgeon general of the United States by President George H.W. Bush in 1990, she was the first woman -- and the first Hispanic -- ever to hold that office. Her appointment followed nearly two decades of public service at the National Institutes of Health, where, among other responsibilities, she worked with Congress on developing organ transplantation legislation.

(Above) Antonia Novello with Deputy Surgeon General Audrey Forbes Manley and Surgeon General M. Joycelyn Elders, 1998.

courtesy: Antonia C. Novello, M.D., M.P.H., Dr. P.H.

Antonia Novello (left) joined the U.S. Public Health Service Commissioned Corps in 1978, working first with the National Institute of Arthritis, Metabolism, and Digestive Diseases at the National Institutes of Health. Novello's focus on children's health began in her early years of private practice as a pediatrician, and continued through her public health service career. In 1986, she became deputy director of the National Institute of Child Health and Human Development, where she focused research on the issue of pediatric AIDS. As surgeon general, she targeted tobacco advertising aimed at children, particularly the cigarette ads that featured the cartoon character Joe Camel.

Antonia Novello with members of the Lakota Nation, 1991.

courtesy: Antonia C. Novello, M.D., M.P.H., Dr. P.H.

Antonia Novello marshalled the prestige of her position as surgeon general to educate the public. Focusing on the health of young people, women, and minorities, she issued frank reports and spoke out on smoking, underage drinking, drug abuse, and AIDS. She also promoted immunization and injury prevention for children, as well as improved health care for Hispanics and other minorities. Novello visited a number of Indian reservations to draw attention to the health needs of American Indians. To commemorate her visits to the Pine Ridge Reservation, South Dakota, the public health officers at the reservation had a stethoscope beaded especially for her.

Stethoscope presented to Antonia Novello by the public health officers at the Pine Ridge Reservation, South Dakota, 1991.

courtesy: Antonia C. Novello, M.D., M.P.H., Dr. P.H.

Local Legends

The National Library of Medicine, in partnership with the American Medical Women's Association, invites you to celebrate the accomplishments of women physicians throughout your communities. These Local Legends were nominated by Congressional representatives for their contribution to the health of their communities.

(Local Legends logo)

www.nlm.nih.gov/locallegends

Linda Warren, M.D.

Kansas

Nominating Member of Congress: Jerry Moran (R-KS-1)

Mercy Obelme, M.D.

Indiana

Nominating Member of Congress: Julia Carson (D-IN-7)

Janice F. Gable, M.D. (left)

Virginia

Nominating Member of Congress: Rick Boucher (D-VA-9)

Making a Difference

(Background photo) After the sudden death of her father, S. Josephine Baker (1873-1945) gave up a scholarship to Vassar College. Instead, she trained as a physician so that she could earn a steady income and help support her family. Baker built a prominent career in public health, caring for communities and devising broad social programs to improve health and welfare. In 1908, she was appointed the first director of the New York City Bureau of Child Hygiene, the first organization of its kind in the country, and later a model for the United States Children's Bureau.

courtesy: Library of Congress, Prints and Photographs Division, LC-USZ62-058326, 1920

During the suffrage days I had no great illusion about my sex; I wanted the vote as a matter of common justice. But I still believe that women have something to offer this sick world that men either do not have or have not offered. -- S. Josephine Baker, Fighting for Life, 1939

During her first year at medical school, Lisa I. Iezzoni (b. 1954) was diagnosed with multiple sclerosis. Because of her illness, she was denied an internship and so she moved into research to continue her career. Today, Iezzoni is a leading authority on methods to evaluate health care. In 1998, she became the first woman to be appointed professor in the department of medicine at Beth Israel Hospital in Boston, Massachusetts.

courtesy: Lisa I. Iezzoni, M.D., M.Sc., 1990

This [her diagnosis with multiple sclerosis] was years before the 1990 Americans with Disabilities Act, and from early on, I received frequent hints that my medical career was in jeopardy. Confronting the physical limitations and uncertainty of MS was only one step. I also had to deal with people's reactions to me -- the "me" they equated with my disease. -- Lisa I. Iezzoni, 2002

(Above) Frances Conley (b. 1940) was the first woman to be appointed a tenured full professor of neurosurgery at a medical school in the United States. In 1991, Conley made national headlines when she announced her intention to resign her tenured position at Stanford University Medical School to protest against sexism in the school.

courtesy: Frances K. Conley, M.D., M.S.

Her exceptional judgment in evaluating a new drug for safety for human use has prevented a major tragedy of birth deformities in the United States. Through high ability and steadfast confidence in her professional decision she has made an outstanding contribution to the protection of the health of the American people. -- President John F. Kennedy, awarding Frances Kelsey the President's Award for Distinguished Federal Civilian Service, 1962

In 1960, during her first month on the staff of the U.S. Food and Drug Administration, Frances Kelsey (b. 1914) refused to approve the release of the drug thalidomide in the United States. Thalidomide had been used as a sleeping pill in Europe, and was later proven to have caused thousands of birth deformities in Germany and Great Britain.

courtesy: National Library of Medicine, Images from the History of Medicine, 1962

Barbara Ross-Lee (b. 1942) was appointed dean of the College of Osteopathic Medicine of Ohio University in 1993, making her the first African American dean of an American medical school.

As a college student, her academic advisor -- who did not believe women should be physicians -- had refused to authorize Ross's request to major in human anatomy. She was later able to complete her pre-medical training while serving in the National Teacher Corps, studying part-time while teaching in public schools in Detroit.

courtesy: Barbara Ross-Lee, M.A., D.O., photograph copyright Jay Brandy Photography, Inc., 2001

I never planned, or had a dream of being a dean of a medical school, or a vice president at an institution of higher education. It came in a very serendipitous way. At each step along the way in my professional life ... I have tried to take the next step, to make a bigger difference. -- Barbara Ross-Lee, 2003

[Section six]

Building the Future

Addressing today's challenging health care needs, women physicians work in the highest ranks of medical administration and research. Drawing on their own interests and experiences, women physicians are instituting changes that are having far-reaching benefits for the health and happiness of families, communities, and medical practitioners themselves.

The influence of these women reaches across the profession and out into our lives, helping to redefine women's roles and society's responsibilities. By changing the face of medicine, women physicians are helping to change our world.

What about the physicians of the future?

Will you, your child, your sister, or your neighbor walk in the footsteps of the remarkable women in this exhibition? Will you discover life-saving cures, care for neglected communities, solve unforeseen health problems? We hope you will be inspired by American's women physicians to nurture your own talents and to make your own unique contributions to the world.

Photo captions:

(Left) The P.S. 196 district playground was made safe by pediatrician Barbara Barlow and a team of volunteers, Harlem, New York, 2000.

courtesy: Barbara Barlow, M.A., M.D.

Dr. Nancy Snyderman was a correspondent for ABC's *Good Morning America* during the Persian Gulf War of 1991.

courtesy: Nancy Snyderman, M.D.

Dr. Joan Reede (center) with students Thuyanh Le (left) and Joyce Imahiyerobo (right) at Harvard University's Biomedical Sciences Career Program Conference, 2001.

courtesy: Joan Reede, M.D., M.P.H., M.S.

Exhibition Credits

Changing the Face of Medicine: Celebrating America's Women Physicians was developed by the Exhibition Program of the History of Medicine Division of the National Library of Medicine in collaboration with the American Library Association Public Programs Office. The traveling

exhibition is based upon a major exhibition displayed at the National Library of Medicine from 2003-2005.

This traveling exhibition has been made possible by the National Library of Medicine, dedicated to making the most accurate and up-to-date health information freely available to all, and the National Institutes of Health Office of Research on Women's Health, dedicated to promoting, stimulating, and supporting efforts to improve the health of women. The American Medical Women's Association provided additional support.

Message from the Ad Hoc Advisory Group

In 2001, Donald A.B. Lindberg, M.D., director of the National Library of Medicine, and Tenley E. Albright, M.D., invited distinguished individuals in the medical community to participate in an Ad Hoc Advisory Group and to nominate exemplary physicians for inclusion in *Changing the Face of Medicine*, an exhibition that celebrates the lives and achievements of America's Women Physicians.

Over the last 150 years, thousands of women have pursued a medical degree, have practiced medicine, conducted research, and lived full and rich lives. Their stories and their careers inspire each succeeding generation of women as they open doors, make new discoveries, and change the face of medicine.

It would be impossible to recognize the achievements and contributions of every woman physician. We hope that by examining this exhibition, you will consider the women physicians here as examples of the fuller fabric of women's contributions to medicine and their personal achievements in society.

If you know of a woman physician who you think should be part of this project, we invite you to *Share Your Story* in a link of that name on the exhibition's Web site.
www.nlm.nih.gov/changingthefaceofmedicine.

(List of committee members)

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